

PERFORMANCE BOND (See instructions on Page 2.)	DATE BOND EXECUTED (Must be same or later than date of contract)	FORM APPROVED OMB NO. 9000-0045
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Public reporting burden for this collection of information is estimated to average 25 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the FAR Secretariat (VRS), Office of Federal Acquisition Policy, GSA, Washington, D.C. 20405; and to the Office of Management and Budget, Paperwork Reduction Project (9000-0045), Washington, D.C. 20503.

PRINCIPAL (Legal name and business address)	TYPE OF ORGANIZATION ("X" one)			
	<input type="checkbox"/> INDIVIDUAL		<input type="checkbox"/> PARTNERSHIP	
	<input type="checkbox"/> JOINT VENTURE		<input type="checkbox"/> CORPORATION	
STATE OF INCORPORATION				
SURETY(IES) (Name(s) and business address(es))	PENAL SUM OF BOND			
	MILLION(S)		THOUSAND(S)	
	HUNDRED(S)		CENTS	
	CONTRACT DATE		CONTRACT NO.	

OBLIGATION:

We, the Principal and Surety(ies), are firmly bound to the United States of America (hereinafter called the Government) in the above penal sum. For payment of the penal sum, we bind ourselves, our heirs, executors, administrators, and successors, jointly and severally. However, where the Sureties are corporations acting as co-sureties, we, the Sureties, bind ourselves in such sum "jointly and severally" as well as "severally" only for the purpose of allowing a joint action or actions against any or all of us. For all other purposes, each Surety binds itself, jointly and severally with the Principal, for the payment of the sum shown opposite the name of the Surety. If no limit of liability is indicated, the limit of liability is the full amount of the penal sum.

CONDITIONS:

The principal has entered into the contract identified above.

THEREFORE:

The above obligation is void if the Principal -

(a)(1) Performs and fulfills all the undertakings, covenants, terms, conditions, and agreements of the contract during the original term of the contract and any extensions thereof that are granted by the Government, with or without notice to the Surety(ies), and during the life of any guaranty required under the contract, and (2) performs and fulfills all the undertakings, covenants, terms, conditions, and agreements of any and all duly authorized modifications of the contract that hereafter are made. Notice of those modifications to the Surety(ies) are waived.

(b) Pays to the Government the full amount of the taxes imposed by the Government, if the said contract is subject to the Miller Act, (40 U.S.C. 270a-270e), which are collected, deducted, or withheld from wages paid by the Principal in carrying out the construction contract with respect to which this bond is furnished.


WITNESS:

The Principal and Surety(ies) executed this performance bond and affixed their seals on the above date.

PRINCIPAL					
SIGNATURE(S)	1.	2.	3.	Corporate Seal	
	(Seal)	(Seal)	(Seal)		
NAME(S) & TITLE(S) (Typed)	1.	2.	3.	Corporate Seal	
INDIVIDUAL SURETY(IES)					
SIGNATURE(S)	1.	2.	Corporate Seal		
	(Seal)	(Seal)			
NAME(S) & TITLE(S) (Typed)					
CORPORATE SURETY(IES)					
SURETY A	NAME & ADDRESS			STATE OF INC.	LIABILITY LIMIT
	SIGNATURE(S)	1.	2.	Corporate Seal	
	NAME(S) & TITLE(S) (Typed)				

CORPORATE SURETY(IES) (Continued)

SURETY B	NAME & ADDRESS			STATE OF INC.	LIABILITY LIMIT \$	Corporate Seal
	SIGNATURE(S)	1.	2.			
	NAME(S) & TITLE(S) (Typed)					
SURETY C	NAME & ADDRESS			STATE OF INC.	LIABILITY LIMIT	Corporate Seal
	SIGNATURE(S)	1.	2.			
	NAME(S) & TITLE(S) (Typed)					
SURETY D	NAME & ADDRESS			STATE OF INC.	LIABILITY LIMIT	Corporate Seal
	SIGNATURE(S)	1.	2.			
	NAME(S) & TITLE(S) (Typed)					
SURETY E	NAME & ADDRESS			STATE OF INC.	LIABILITY LIMIT	Corporate Seal
	SIGNATURE(S)	1.	2.			
	NAME(S) & TITLE(S) (Typed)					
SURETY F	NAME & ADDRESS			STATE OF INC.	LIABILITY LIMIT	Corporate Seal
	SIGNATURE(S)	1.	2.			
	NAME(S) & TITLE(S) (Typed)					
SURETY G	NAME & ADDRESS			STATE OF INC.	LIABILITY LIMIT	Corporate Seal
	SIGNATURE(S)	1.	2.			
	NAME(S) & TITLE(S) (Typed)					

BOND PREMIUM 	RATE PER THOUSAND	TOTAL
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INSTRUCTIONS

1. This form is authorized for use in connection with Government contracts. Any deviation from this form will require the written approval of the Administrator of General Services.

2. Insert the full legal name and business address of the Principal in the space designated "Principal" on the face of the form. An authorized person shall sign the bond. Any person signing in a representative capacity (e.g., an attorney-in-fact) must furnish evidence of authority if that representative is not a member of the firm, partnership, or joint venture, or an officer of the corporation involved.

3. (a) Corporations executing the bond as sureties must appear on the Department of the Treasury's list of the approved sureties and must act within the limitation listed therein. Where more than one corporate surety is involved their names and addresses shall appear in the spaces (Surety A, Surety B, etc.) headed "CORPORATE SURETY(IES)." In the space designated "SURETY(IES)" on the face of the form insert only the letter identification of the Sureties.

(b) Where individual sureties are involved, a completed Affidavit of Individual Surety (Standard Form 28), for each individual surety, shall accompany the bond. The Government may require the surety to furnish additional substantiating information concerning its financial capability.

4. Corporations executing the bond shall affix their corporate seals. Individuals shall execute the bond opposite the word "Corporate Seal", and shall affix an adhesive seal if executed in Maine, New Hampshire, or any other jurisdiction requiring adhesive seals.

5. Type the name and title of each person signing this bond in the space provided.

PAYMENT BOND (See Instructions on Reverse)		1. DATE BOND EXECUTED (MUST NOT BE LATER THAN DATE OF CONTRACT.)	
2. PRINCIPAL (LEGAL NAME AND BUSINESS ADDRESS)		3. TYPE OF ORGANIZATION ("X" ONE) <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Joint Venture <input type="checkbox"/> Corporation	
5. SURETY(IES) (NAME AND BUSINESS ADDRESS)		4. STATE OF INCORPORATION	

a. Penal Sum of Bond					b. Bid Identification	
Percent of of Bid Price	Amount not to exceed				Bid Date	Invitation No.
	Million(s)	Thousand(s)	Hundred(s)	Cents	For (Construction , Supplies or Services)	

OBLIGATION:

We, the Principal and Surety(ies) are firmly bound to the United States of America (hereinafter called the Government) in the above penal sum. For payment of the penal sum, we bind ourselves, our heirs, executors, administrators, and successors, jointly and severally. However, where the Sureties are corporations acting as co-sureties, we, the Sureties, bind ourselves in such sum "jointly and severally" as well as "severally" only for the purpose of allowing a joint action or actions against any or all of us. For all other purposes, each Surety binds itself, jointly and severally with the Principal, for the payment of the sum shown opposite the name of the Surety. If no limit is indicated, the limit of liability is the full amount of the penal sum.

CONDITIONS:

The above obligation is void if the Principal promptly makes payment to all persons having a direct relationship with the Principal or a subcontractor of the principal for furnishing labor, material or both in the prosecution of the work provided for in the contract identified above, and any authorized modifications of the contract that subsequently are made. Notice of those modifications to the Surety(ies) are waived.

WITNESS:

The Principal and surety(ies) executed this bid bond and affixes their seals on the above date.

6. PRINCIPAL					
a. Signature(s)	(1)	(2)	(3)		Corporate Seal
	(seal)	(seal)	(seal)		
b. Name(s) & Titles (Typed)	(1)	(2)	(3)		
7. INDIVIDUAL SURETY(IES)					
a. Signature(s)	(1)	(2)			
		(Seal)		(Seal)	
b. Name(s) (Typed)	(1)	(2)			
8. CORPORATE SURETY(IES)					
S u r e t y A	a. Name & Address	b. State of Inc.		a. Liability Limit	Corporate Seal
	d. Signatures	(1)	(2)		
	e. Name(s) & Title(s) (Typed)	(1)	(2)		

8. CORPORATE SURETY(IES) (Continued)

S u r e t y B	a. Name & Address		b. State of Inc.	a. Liability Limit	Corporate Seal
	d. Signatures	(1)	(2)		
	e. Name(s) & Title(s) (Typed)	(1)	(2)		
S u r e t y C	a. Name & Address		b. State of Inc.	a. Liability Limit	Corporate Seal
	d. Signatures	(1)	(2)		
	e. Name(s) & Title(s) (Typed)	(1)	(2)		
S u r e t y D	a. Name & Address		b. State of Inc.	a. Liability Limit	Corporate Seal
	d. Signatures	(1)	(2)		
	e. Name(s) & Title(s) (Typed)	(1)	(2)		
S u r e t y E	a. Name & Address		b. State of Inc.	a. Liability Limit	Corporate Seal
	d. Signatures	(1)	(2)		
	e. Name(s) & Title(s) (Typed)	(1)	(2)		
S u r e t y F	a. Name & Address		b. State of Inc.	a. Liability Limit	Corporate Seal
	d. Signatures	(1)	(2)		
	e. Name(s) & Title(s) (Typed)	(1)	(2)		
S u r e t y G	a. Name & Address		b. State of Inc.	a. Liability Limit	Corporate Seal
	d. Signatures	(1)	(2)		
	e. Name(s) & Title(s) (Typed)	(1)	(2)		

Instructions

1. This form, for the protection of persons supplying labor and material is used when a payment bond is required under the Act of August 24, 1935, 49 Stat. 793 (40 USC 270a-270e).
2. Insert the full legal name and business address of the Principal in the space designated "Principal" on the face of the form. An authorized person shall sign the bond. Any person signing in a representative capacity (e.g., an attorney-in-fact) must furnish evidence of authority if that representative is not a member of the firm, partnership, or joint venture, or an officer of the corporation involved.
3. (a) Corporations executing the bond as sureties must appear on the Department of the Treasury's list of approved sureties and must act within the limitation listed therein. Where more than one corporate surety is involved, their names and addresses shall appear in the space (Surety A, Surety B, etc.) headed "CORPORATE SURETY(IES)." In the space designated "SURETY(IES)" on the face of the form, insert only the letter identification of the sureties.
4. (b) Where individual sureties are involved, a completed Affidavit of Individual Surety (Standard Form 28), for each individual surety, shall accompany the bond. The Government may require the surety to furnish additional substantiating information concerning its financial capability.
5. Corporations executing the bond shall affix their corporate seals. Individuals shall execute the bond opposite the word "Corporate Seal;" and shall affix an adhesive seal if executed in Maine, New Hampshire, or any other jurisdiction requiring adhesive seals.
6. Type the name and title of each person signing this bond in the space provided.

General Decision Number: OK080034 07/24/2009 OK34

Superseded General Decision Number: OK20070034

State: Oklahoma

Construction Type: Building

County: Oklahoma County in Oklahoma.

BUILDING CONSTRUCTION PROJECTS, Excluding incidental utility work, (does not include residential construction consisting of single family homes and apartments up to and including 4 stories, sewage and water treatment plants or the construction, alteration and repair of any facility engaged in manufacturing).

Modification Number	Publication Date
0	02/08/2008
1	02/15/2008
2	05/30/2008
3	06/06/2008
4	06/27/2008
5	07/04/2008
6	08/29/2008
7	10/10/2008
8	10/31/2008
9	11/28/2008
10	12/05/2008
11	01/23/2009
12	02/06/2009
13	06/26/2009
14	07/24/2009

ASBE0094-004 07/16/2006

	Rates	Fringes
Asbestos/Insulator Worker.....	\$ 23.49	10.26

SCOPE OF WORK:

Includes application of all insulation materials, protective coverings and finishings to all types of mechanical systems.

BROK0005-001 06/01/2008

	Rates	Fringes
BRICKLAYER.....	\$ 23.76	8.40

ELEC1141-006 05/27/2009

	Rates	Fringes
ELECTRICIAN.....	\$ 26.00	17.25%+4.70

ELEV0063-001 01/01/2009

	Rates	Fringes
Elevator Constructor		
Mechanic.....	\$ 31.12	18.285

FOOTNOTE:

a. Paid Holidays: New Year's Day; Memorial Day; July 4th; Labor Day; Thanksgiving Day; Friday after Thanksgiving Day; Christmas Day., Vacation Pay Credit: Employer contributes 8% of the basic hourly rate for employees with 5 years or more of service or 6% of the basic hourly rate for employees with 6 months to 5 years of service.

ENGI0627-010 06/01/2008

	Rates	Fringes
Power Equipment Operator		
All Crane Type Equipment with at least 100 ft. and less than 200 ft. of boom (including jib); All Tower Cranes; Crane Equipment (as rated by mfg.) 3 cu. yd. and over); Guy derrick; Whirley.	\$ 22.55	10.54
All Crane Type Equipment with at least 200 ft. of boom and less than 300 ft. of boom (including jib).....	\$ 23.10	10.54
Bobcat.....	\$ 21.45	10.54
Cement Mixers:		
18 Cu. Ft. and over.....	\$ 18.70	10.54
Less than 18 Cu. ft.....	\$ 18.70	10.54
Cherry Picker.....	\$ 21.95	10.54
Cranes with less than 100 ft. of boom with jib and Cranes (as rated by mfg.) less than 3 cu.; Overhead		
Monorail type crane.....	\$ 21.95	10.54
Oiler.....	\$ 18.20	10.54

IRON0048-003 06/01/2008

	Rates	Fringes
IRONWORKER, REINFORCING.....	\$ 22.10	10.01

PAIN0807-003 06/15/2004

	Rates	Fringes
Painters:		
Paperhanger.....	\$ 19.00	2.35
Roller.....	\$ 18.00	2.35

Spray.....	\$ 18.00	2.35
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PLAS0809-003 06/01/2001

	Rates	Fringes
CEMENT MASON/CONCRETE FINISHER...	\$ 16.31	1.55

PLUM0344-004 07/01/2008

	Rates	Fringes
PLUMBER/PIPEFITTER (Including HVAC Work).....	\$ 25.88	10.92

ROOF0143-001 06/01/2008

	Rates	Fringes
ROOFER, Including Built Up, Composition and Single Ply Roofs.....	\$ 19.32	5.03

* SHEE0124-007 07/01/2009

	Rates	Fringes
Sheet Metal Worker (Including HVAC Work).....	\$ 27.32	11.62

SUOK1995-001 09/07/1995

	Rates	Fringes
Carpenters: (Excluding Drywall hanging & Acoustical Installation).....	\$ 11.90	
DRYWALL FINISHER/TAPER.....	\$ 12.83	2.53
DRYWALL HANGER (Including Acoustical Installation & Metal Stud/Lath in Connection with Drywall Hanging).....	\$ 11.29	.10
FLOOR LAYER: CARPET (SOFT) FLOOR.....	\$ 15.10	1.52
GLAZIER.....	\$ 12.17	
INSULATOR - BATT.....	\$ 12.85	3.30
IRONWORKER, STRUCTURAL (Excluding Metal Building Erection).....	\$ 12.03	

Laborers:

Brick Tender.....	\$ 8.69	
Common.....	\$ 7.37	
Plaster Tender.....	\$ 9.30	1.31
LATHER.....	\$ 15.06	2.15
METAL BUILDING ERECTOR.....	\$ 9.12	
Painters:		
Brush.....	\$ 12.50	2.53
PLASTERER.....	\$ 15.69	
Power Equipment Operator		
Asphalt Laydown Machine.....	\$ 9.00	
Backhoes.....	\$ 14.06	3.49
Bulldozers.....	\$ 14.40	2.58
Forklifts.....	\$ 12.15	3.53
Graders.....	\$ 12.60	2.57
Hole Diggers.....	\$ 14.40	2.00
Loaders.....	\$ 11.36	2.40
Rollers.....	\$ 11.72	2.05
SPRINKLER FITTER.....	\$ 15.87	5.58
TILE SETTER.....	\$ 14.61	

WELDERS - Receive rate prescribed for craft performing operation to which welding is incidental.

Unlisted classifications needed for work not included within the scope of the classifications listed may be added after award only as provided in the labor standards contract clauses (29CFR 5.5 (a) (1) (ii)).

In the listing above, the "SU" designation means that rates listed under the identifier do not reflect collectively bargained wage and fringe benefit rates. Other designations indicate unions whose rates have been determined to be prevailing.

WAGE DETERMINATION APPEALS PROCESS

1.) Has there been an initial decision in the matter? This can be:

- * an existing published wage determination
- * a survey underlying a wage determination
- * a Wage and Hour Division letter setting forth a position on a wage determination matter
- * a conformance (additional classification and rate) ruling

On survey related matters, initial contact, including requests for summaries of surveys, should be with the Wage and Hour Regional Office for the area in which the survey was conducted because those Regional Offices have responsibility for the Davis-Bacon survey program. If the response from this initial contact is not satisfactory, then the process described in 2.) and 3.) should be followed.

With regard to any other matter not yet ripe for the formal process described here, initial contact should be with the Branch of Construction Wage Determinations. Write to:

Branch of Construction Wage Determinations
Wage and Hour Division
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, DC 20210

2.) If the answer to the question in 1.) is yes, then an interested party (those affected by the action) can request review and reconsideration from the Wage and Hour Administrator (See 29 CFR Part 1.8 and 29 CFR Part 7). Write to:

Wage and Hour Administrator
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, DC 20210

The request should be accompanied by a full statement of the interested party's position and by any information (wage payment data, project description, area practice material, etc.) that the requestor considers relevant to the issue.

3.) If the decision of the Administrator is not favorable, an interested party may appeal directly to the Administrative Review Board (formerly the Wage Appeals Board). Write to:

Administrative Review Board
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, DC 20210

4.) All decisions by the Administrative Review Board are final.

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END OF GENERAL DECISION

Operational Control Document	
A. Significant Environmental Aspect: Air Emissions	B. Objectives: Comply with all applicable regulations and other requirements.
C. Document Control Code: AMP-400 OC-2.01-01	D. Revision Date: 07/01/09
1. Source of Aspect (activities): (select activities that are applicable to your organization) Facility planning and design	
2. Legal and Other Requirements (specific to activities): <ul style="list-style-type: none"> Clean Air Act [Now codified at 42 USC 7401-7642](First enacted July 14, 1955 at 69 Stat. 485; First major amendments were PL 91-604, December 31, 1970; Completely revised August 7, 1977; Amended: 1978, 1980, 1981, 1983, 1990). OAC 252:100 Air Pollution Control FAA Order 1050.18 Chlorofluorocarbons and Halon Use at FAA Facilities Air Emissions Permit No. 2002-518-O issued by ODEQ on 2/25/05 	
3. Operational Controls (such as technological, operational, procedural [and corresponding written controls, where applicable]): <ul style="list-style-type: none"> Notify AMP-100A of new equipment scheduled to be installed annually 	
4. Maintenance plan(s) for the operational controls: <ul style="list-style-type: none"> Review and update this operational control document and associated work process instructions annually 	
5. Actions to be taken if controls fail: <ul style="list-style-type: none"> Conduct after-action meetings to discuss necessary corrective actions. 	
6. Record(s): Records of annual new equipment combustion list	
7. Responsibility:	
Controls (from 3 above)	Responsible Individual (s)
Provide AMP-100 with equipment data	AMP-400 Environmental Network Representative or Alternate
8. Competency (as evidenced by training, experience, or education.)	
Title or Name	Competence
AMP-400 Environmental Network Representative or Alternate	Environmental Awareness Training
Authorization	
Charles T. Sullivan, Jr.	Date

Operational Control	
A. Significant Environmental Aspect: Asbestos Releases	B. Objectives: Maintain compliance with all regulations and other applicable requirements.
C. Document Control Code: AMP-400 OC-2.02-01	D. Revision Date: 07/01/09
1. Source of Aspect (activities): Building Renovation & Equipment Replacement	
2. Legal and Other Requirements (specific to activities): <ul style="list-style-type: none"> EPA: 40 CFR Part 61, Subpart M (NESHAPS) & 40 CFR Part 763 DOT: 49 CFR 171 and 172 OSHA: 29 CFR 1910.1001 Oklahoma Asbestos Control Act, Title 40, Sections 450 to 456 and Abatement of Friable Asbestos Materials Rules, 380:50-1-1 through 380:50-29-1 FAA and MMAC Asbestos Regulations, Procedures, Management Plans, and Contingency Plans (AC 3900.29A, FAA Order 3900.19B – Chapter 15) AMP-100A Asbestos Abatement Services Contract Construction/OCAT contracts 	
3. Operational Controls (such as technological, operational, procedural [and corresponding written controls, where applicable]) <ul style="list-style-type: none"> Submit projects for AMP-100 to review whether or not asbestos material exists in proposed project area Notify AMP-100 if asbestos material is discovered during construction activities. 	
4. Maintenance plan(s) for the operational controls: Operational controls shall be reviewed at least annually by the organization Environmental Network Representative.	
5. Actions to be taken if controls fail: Determine the root cause of failure(s) and modify the documentation and any associated training.	
6. Record(s): Record of memo to AMP-100 to review the project.	
7. Responsibility:	
Controls (from 3 above)	Responsible Individual(s)
Submit projects for AMP-100 to review	Project Manager
8. Competency (as evidenced by training, experience, or education.)	
Title or Name	Competence
Project Manager	Qualifications are listed in the applicable job description.
Authorization	
Charles T. Sullivan, Jr.	Date

Operational Control Document	
A. Significant Environmental Aspect: Storm Water Discharges	B. Objectives: Maintain Compliance with all applicable regulations and other requirements.
C. Document Control Code: AMP-400 OC-2.04.3-01	D. Revision Date: 07/01/09
1. Source of Aspect (activities): Construction activities	
2. Legal and Other Requirements (specific to activities): <ul style="list-style-type: none"> Clean Water Act [Enacted October 18, 1972 as PL 92-500, a comprehensive revision of the Federal Water Pollution Control Act; Now codified at 33 USC 1251-1376] (Amended every year between 1973 and 1983, and in 1987.) ODEQ GP-00-01 Multi-Sector General Permit (MSGP) for Industrial Activities MMAC Storm Water Pollution Prevention Plan (SWPPP) 	
3. Operational Controls (such as technological, operational, procedural [and corresponding written controls, where applicable]): <ul style="list-style-type: none"> Notify construction contractor of storm water pollution prevention policy at pre-construction conference All washing activities will be performed indoors at a suitable wash bay and discharged into the sanitary sewer. Site preparation will be utilized to prevent potential erosion discharges.(e.g., silt fence, hay bails, rock bags, etc.) Equipment will be stored under cover when possible. Comply with the OKC storm water pollution prevention permit (if applicable). Project managers and construction inspectors will be trained on MMAC's Storm Water Pollution Prevention Plan prior to performing activities that may pose an impact to storm water. 	
4. Maintenance plan(s) for the operational controls: <ul style="list-style-type: none"> Operational controls shall be reviewed at least annually by the organization Environmental Network Representative. 	
5. Actions to be taken if controls fail: <ul style="list-style-type: none"> Perform spill notifications per AC Order 1050.4 in the event of a spill or unauthorized discharge. Conduct after-action meetings to discuss necessary corrective actions. 	
6. Record(s): <ul style="list-style-type: none"> Training records of Project Managers, Inspectors and Contractors. 	
7. Responsibility:	
Controls (from 3 above)	Responsible Individual
Notify construction contractor of storm water pollution prevention policy at pre-construction conference	Project Manager & Construction Inspector
Site preparation will be utilized to prevent potential erosion discharges. e.g., silt fence, hay bails, rock bags, etc.)	Project Manager & Construction Inspector
Conduct Storm Water Pollution Prevention Plan training	AMP-400 Environmental Network Representative
8. Competency (as evidenced by training, experience, or education.)	
Title or Name	Competence

Project Manager	Qualifications are listed in the applicable job description
AMP-400 Environmental Network Representative or Alternate	Environmental Awareness Training
Construction Inspector	Qualifications are listed in the applicable job description
Authorization	
Charles T. Sullivan, Jr.	Date

Operational Control Document	
A. Significant Environmental Aspect: Solid Waste Generation	B. Objectives: Comply with all applicable regulations and other requirements
C. Document Control Code: AMP-400-OC-2.05-01	D. Revision Date: 07/01/09
1. Source of Aspect (activities): <ul style="list-style-type: none"> • Generation of waste paper from office activities. • Activities related to government acquisition. 	
2. Legal and Other Requirements (specific to activities): <ul style="list-style-type: none"> • Solid Waste Disposal Act, PL 89-272 • Resource Conservation and Recovery Act (RCRA), PL 94-580, 42 U.S. C., 6901-6907, Section 6002 • E.O. 13101, Sec 503 & 505 - Greening the government through Waste Prevention, Recycling and Federal Acquisition • OAC 252:515 Management of Solid Waste 	
3. Operational Controls (such as technological, operational, procedural and corresponding written controls, where applicable) <ul style="list-style-type: none"> • Submit project information for AMP-100 to review if PCB-containing equipment will be affected or if lead based paint will be disturbed by construction activities. 	
4. Maintenance plan(s) for the operational controls: <ul style="list-style-type: none"> • Review and update this operational control annually 	
5. Actions to be taken if controls fail: <ul style="list-style-type: none"> • Conduct after-action meetings to discuss corrective actions. 	
6. Record(s): <ul style="list-style-type: none"> • Record of Operational Control review (annual) 	
7. Responsibility	
Controls (from 3 above)	Responsible Individual
Remind personnel of the MMAC Recycling program	AMP-400 Environmental Network Representative or Alternate
Purchase recycled office products	Office Administrator
8. Competency (as evidenced by training, experience, or education.)	
Title or Name	Competence
AMP-400 Environmental Network Representative or Alternate	Environmental Awareness Training
Office Administrator	Qualifications are listed the applicable job description and job performance standards.
Authorization	
Charles T. Sullivan, Jr.	Date

Operational Control Document	
A. Significant Environmental Aspect: Toxic Substance Releases	B. Objectives: Comply with all applicable regulations and other requirements
C. Document Control Code: AMP-400 OC-2.09-01	D. Revision Date: 07/01/09
1. Source of Aspect (activities): In-service use of PCB- containing electrical equipment. Removal of lead-based paint.	
2. Legal and Other Requirements (specific to activities): Toxic Substance Control Act 15 US Code 2601-2671 PCB's 40 CFR Part 761	
3. Operational Controls (such as technological, operational, procedural and corresponding written controls, where applicable): <ul style="list-style-type: none"> • Notify Construction Contractor of toxic substance releases prevention policy. • Submit project for AMP-100 to review • AMP-100 to notify AMP-400 if PCB containing equipment will be effected by construction • AMP-100 to provide containers and dispose of PCB containing devises • AMP-100 to notify AMP-400 if lead paint is in the construction area 	
4. Maintenance plan(s) for the operational controls: <ul style="list-style-type: none"> • Review and update this operational control annually. 	
5. Actions to be taken if controls fail: <ul style="list-style-type: none"> • Notify AMP-100A • Conduct after-action meeting to discuss necessary corrective action. 	
6. Record(s): <ul style="list-style-type: none"> • Record of Operational Control review (annual) • Record of memo to AMP-100 to review the project. 	
7. Responsibility:	
Controls (from 3 above)	Responsible Individual
Submit projects for AMP-100 to review	Project Manager
8. Competency (as evidenced by training, experience, or education.)	
Title or Name	Competence
Project Manager	Qualifications are listed in the applicable job description
Authorization	
Charles T. Sullivan, Jr.	Date

Operational Control	
A. Significant Environmental Aspect: Generation of Noise & Other Emissions	B. Objectives: Maintain compliance with all regulations and other applicable requirements.
C. Document Control Code: AMP-400 OC-2.15-01	D. Revision Date: 07/01/09
1. Source of Aspect (activities): Noise from construction activities	
2. Legal and Other Requirements (specific to activities): <ul style="list-style-type: none"> Noise Control Act, 42 USC 4901-4918 National Environmental Policy Act of 1969 (NEPA); 42 U.S.C. 4321-4347 NEPA regulations as set forth in 40 CFR Parts 1500 –1508 FAA Order 3910.3, Radiation Health Hazards and Protection 	
3. Operational Controls (such as technological, operational, procedural [and corresponding written controls, where applicable]) <ul style="list-style-type: none"> Notify initiating organization and Labor Relations of impending construction. 	
4. Maintenance plan(s) for the operational controls: <ul style="list-style-type: none"> Review and update this operational control annually. 	
5. Actions to be taken if controls fail: <ul style="list-style-type: none"> Relocate personnel affected or shift construction time 	
6. Record(s): <ul style="list-style-type: none"> Records of annual operational control reviews 	
7. Responsibility:	
Controls (from 3 above) Ensure controls are in place	Responsible Individual Project Manager
8. Competency (as evidenced by training, experience, or education.)	
Title or Name Project Manager	Competence Qualifications are listed in the applicable job description
Authorization	
Charles T. Sullivan, Jr.	Date

Operational Control Document

A. Significant OSH Hazard: Electrical	B. Objective(s): <ul style="list-style-type: none"> Comply with applicable regulations and other requirements Protect MMAC personnel from electrical hazards
C. Document Control Code: AMP400-OC-3.1-1	D. Date: 5/27/09 Revision Date:
1. Source of Hazard (activities): <ul style="list-style-type: none"> Unexpected energization of equipment while replacing/demolishing/installing energized electrical equipment. 	
2. Legal and Other Requirements (specific to activities): <ul style="list-style-type: none"> 29 CFR 1910.137, Electrical Protective Devices; 1910.147, The Control of Hazardous Energy; and Subpart S, Electrical FAA Order 3900.19B, Chapter 13, Hazardous Energy Control Program, and Chapter 34, Electrical Safety AC Order 3900.21F, Chapter 13, Hazardous Energy Control, and Chapter 34, Electrical Safety NFPA 70E, Standard for Electrical Safety in the Workplace ANSI Z244.1, Control of Hazardous Energy Lockout/Tagout and Alternative Methods ASTM Standards for Rubber-Insulating Equipment OSHA Voluntary Protection Program Policies and Procedures Manual, Directive #CSP03-01-003 Technical Manuals for equipment AMP-100A EOSH Services Contract Parsons MMAC Site-Specific Safety Plan (applicable to Parsons personnel) Construction contracts that may affect this hazard 	
3. Operational Controls (such as engineering, administrative where applicable): <ul style="list-style-type: none"> Contact AMP-100 for prior to construction contractor's energized work for an electrical safety hazard evaluation. Qualified Persons perform energized work Personnel utilize electrical PPE such as rubber insulated gloves, leather outers, and arc flash clothing as necessary Follow applicable LOTO procedures Conduct inspections of construction worksites and send advisory notices if safety hazards are observed. 	
4. Maintenance plan(s) for the operational controls: <ul style="list-style-type: none"> Review operational control at least annually and revise as necessary 	
5. Actions to be taken if controls fail: <ul style="list-style-type: none"> Conduct after-action meeting to discuss necessary corrective actions, determine the root cause of failure, and modify documentation and any associated training. Contact AMP-100A for accident investigation. 	
6. Record(s): <ul style="list-style-type: none"> Contractor advisory notices. 	
7. Responsibility:	
Controls (from Section 3 above)	Responsible Individual
Contact AMP-100 for prior to energized work for an electrical safety hazard evaluation.	Project Manager or Construction Inspector.
Qualified Persons perform energized work	Responsible organization employees (applicable construction contractors)
Personnel utilize electrical PPE such as rubber insulated gloves, leather outers, and arc flash clothing as necessary	Responsible organization employees (applicable construction contractors)

Operational Control Document

A. Significant OSH Hazard: Ergonomics	B. Objective(s): Comply with applicable regulations and other requirements <ul style="list-style-type: none"> Comply with applicable regulations and other requirements Protect MMAC personnel from serious ergonomic hazards 						
C. Document Control Code: AMP400-OC-4.1-1	D. Date: 5/27/09 Revision Date: 6/15/09						
1. Source of Hazard (activities): <ul style="list-style-type: none"> Placements and movement of heavy equipment (awkward body placement may be required to access equipment) 							
2. Legal and Other Requirements (specific to activities): <ul style="list-style-type: none"> AC Order 3900.21F Chapter 35, Ergonomics FAA Human Factors Design Standard NIOSH Element of Ergonomics Programs Musculoskeletal Disorders and Workplace Factors OSHA Voluntary Protection Program Policies and Procedures Manual, Directive #CSP03-01-003 Parsons MMAC Site-Specific Safety Plan (applicable to Parsons personnel) Applicable construction contracts 							
3. Operational Controls (such as engineering, administrative where applicable): <ul style="list-style-type: none"> Remind personnel and construction contractors to practice safe lifting techniques, when applicable. 							
4. Maintenance plan(s) for the operational controls: <ul style="list-style-type: none"> Review operational control at least annually and revise as necessary 							
5. Actions to be taken if controls fail: <ul style="list-style-type: none"> Conduct after-action meeting to discuss necessary corrective actions and to determine the root cause of failure 							
6. Record(s): <ul style="list-style-type: none"> Records of organization /safety meetings discussing ergonomics 							
7. Responsibility: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 50%; text-align: center;">Controls (from Section 3 above)</th> <th style="width: 50%; text-align: center;">Responsible Individual</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">Remind personnel and construction personnel to practice safe lifting techniques, when applicable</td> <td style="padding: 5px;">AMP-400 OSHMS Representative or Alternate</td> </tr> </tbody> </table>		Controls (from Section 3 above)	Responsible Individual	Remind personnel and construction personnel to practice safe lifting techniques, when applicable	AMP-400 OSHMS Representative or Alternate		
Controls (from Section 3 above)	Responsible Individual						
Remind personnel and construction personnel to practice safe lifting techniques, when applicable	AMP-400 OSHMS Representative or Alternate						
8. Competency (as evidenced by training, experience, or education.) <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 50%; text-align: center;">Title or Name</th> <th style="width: 50%; text-align: center;">Competence</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">AMP-400 OSHMS Representative or Alternate</td> <td style="padding: 5px;">OSHA Course 6000 (or equivalent)</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> </tr> </tbody> </table>		Title or Name	Competence	AMP-400 OSHMS Representative or Alternate	OSHA Course 6000 (or equivalent)		
Title or Name	Competence						
AMP-400 OSHMS Representative or Alternate	OSHA Course 6000 (or equivalent)						
Authorization Charles T. Sullivan Jr.	Date 						

Operational Control Document

A. Significant OSH Hazard: Falls	B. Objective(s): <ul style="list-style-type: none"> Comply with applicable regulations and other requirements Protect MMAC personnel from fall hazards 						
C. Document Control Code: AMP400-OC-5.1-1	D. Date: 5/27/09 Revision Date: 6/15/09						
1. Source of Hazard (activities): <ul style="list-style-type: none"> Construction contractor work on elevated surfaces / AMP-400 personnel using stairs, ramps, or ladders 							
2. Legal and Other Requirements (specific to activities): <ul style="list-style-type: none"> 29 CFR 1910 Subpart D, Walking-Working Surfaces, and Subpart N, Materials Handling and Storage 29 CFR 1926 Subpart M, Fall Protection FAA Order 3900.19B Chapter 9, Reports by Employees on Hazardous Conditions; Chapter 10, Fall Protection Program; and Chapter 31, Office Safety AC Order 3900.21F Chapter 9, Reports by Employees on Hazardous Conditions; Chapter 10, Fall Protection; Chapter 31, Office Safety; and Chapter 36, Walking and Working Surfaces OSHA Voluntary Protection Program Policies and Procedures Manual, Directive #CSP03-01-003 AMP-100A EOSH Services Contract Parsons MMAC Site-Specific Safety Plan (applicable to Parsons personnel) Construction contracts that may affect this hazard 							
3. Operational Controls (such as engineering, administrative where applicable): <ul style="list-style-type: none"> Remind personnel to the appropriate level as required by their work tasks and utilize PPE such as safety shoes, safety glasses, and/or face shields, as appropriate. Conduct inspections of construction worksites and send advisory notices if safety hazards are observed. 							
4. Maintenance plan(s) for the operational controls: <ul style="list-style-type: none"> Review operational control at least annually and revise as necessary 							
5. Actions to be taken if controls fail: <ul style="list-style-type: none"> Conduct after-action meeting to discuss necessary corrective actions and to determine the root cause of failure. If AMP-400 personnel injured, complete a mishap report (AC Form 3900-11). Contact AMP-100A for accident investigation. 							
6. Record(s): <ul style="list-style-type: none"> Records of organization /safety meetings discussing fall protection Contractor advisory notices 							
7. Responsibility: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 50%; text-align: center;">Controls (from Section 3 above)</th> <th style="width: 50%; text-align: center;">Responsible Individual</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">Conduct inspections of construction worksites and send advisory notices if safety hazards are observed.</td> <td style="padding: 5px;">Construction Inspectors</td> </tr> <tr> <td style="padding: 5px;">Remind AMP-400 personnel to the appropriate level as required by their work tasks and utilize PPE such as safety shoes, safety glasses, and/or face shields, as appropriate.</td> <td style="padding: 5px;">OSHMS Representative or alternate</td> </tr> </tbody> </table>		Controls (from Section 3 above)	Responsible Individual	Conduct inspections of construction worksites and send advisory notices if safety hazards are observed.	Construction Inspectors	Remind AMP-400 personnel to the appropriate level as required by their work tasks and utilize PPE such as safety shoes, safety glasses, and/or face shields, as appropriate.	OSHMS Representative or alternate
Controls (from Section 3 above)	Responsible Individual						
Conduct inspections of construction worksites and send advisory notices if safety hazards are observed.	Construction Inspectors						
Remind AMP-400 personnel to the appropriate level as required by their work tasks and utilize PPE such as safety shoes, safety glasses, and/or face shields, as appropriate.	OSHMS Representative or alternate						
8. Competency (as evidenced by training, experience, or education.) <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 50%; text-align: center;">Title or Name</th> <th style="width: 50%; text-align: center;">Competence</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">OSHMS Representative or alternate</td> <td style="padding: 5px;">OSHA course 6000 (or equivalent)</td> </tr> <tr> <td style="padding: 5px;">Construction Inspector</td> <td style="padding: 5px;">Qualifications listed in applicable job</td> </tr> </tbody> </table>		Title or Name	Competence	OSHMS Representative or alternate	OSHA course 6000 (or equivalent)	Construction Inspector	Qualifications listed in applicable job
Title or Name	Competence						
OSHMS Representative or alternate	OSHA course 6000 (or equivalent)						
Construction Inspector	Qualifications listed in applicable job						

Operational Control Document

A. Significant OSH Hazard: Physical

B. Objective(s):

- Comply with applicable regulations and other requirements
- Protect MMAC personnel from physical hazards

C. Document Control Code: AMP400-OC-8.1-1

D. Date: 5/27/09

Revision Date: 6/15/09

1. Source of Hazard (activities):

- Sharp edges are exposed during construction, demolition and remodeling on sheet metal, glass edges, broken tile, and tools.
- Flying debris and particles may be emitted during drilling, grinding, sawing, welding, and wind gusts.
- Falling objects dropped from roof area may strike personnel.

2. Legal and Other Requirements (specific to activities):

- 29 CFR 1910 Subpart N, Materials Handling and Storage; 1910 Subpart O, Machinery and Machine Guarding; 1910.242, Hand and Portable Powered Tools and Equipment, General; and 1910.243, Guarding of Portable Powered Tools
- FAA Order 3900.19B Chapter 25, Personal Protective Equipment; Chapter 26, Industrial Technologies; and Chapter 32, Materials Handling and Storage
- AC Order 3900.21F Chapter 25, Personal Protective Equipment; Chapter 26, Industrial Technology Program; Chapter 32, Materials Handling and Storage
- ASME/ANSI Standards (B30 series) for Cranes, Hoists, Hooks, Slings, etc.
- ANSI B186.1, Safety Code for Portable Air Tools
- OSHA Voluntary Protection Program Policies and Procedures Manual, Directive #CSP03-01-003
- AMP-100A EOSH Services Contracts
- Parsons MMAC Site-Specific Safety Plan (applicable to Parsons personnel)
- Construction contracts that may affect this hazard

3. Operational Controls (such as engineering, administrative where applicable):

- Remind AMP-400 personnel to the appropriate level as required by their work tasks and utilize PPE such as safety shoes, safety glasses, and/or face shields, as appropriate.
- Conduct inspections of construction worksites and send advisory notices if safety hazards are observed.

4. Maintenance plan(s) for the operational controls:

- Review operational control at least annually and revise as necessary

5. Actions to be taken if controls fail:

- Conduct after-action meeting to discuss necessary corrective actions, determine the root cause of failure, and modify the documentation and any associated training.
- If AMP-400 personnel injured, complete a mishap report (AC Form 3900-11).
- Contact AMP-100A for accident investigation

6. Record(s):

- Records of organization /safety meetings discussing construction hazards.
- Contractor advisory notices

7. Responsibility:

Controls (from Section 3 above)	Responsible individual
Conduct inspections of construction worksites and send advisory notices if safety hazards are observed.	Construction Inspectors
Remind AMP-400 personnel to the appropriate level as required by their work tasks and utilize PPE such as safety shoes, safety glasses, and/or face shields, as	OSHMS Representative or alternate

Operational Control Document

A. Significant OSH Hazard: Radiation: Non-Ionizing

B. Objective(s):

- Comply with applicable regulations and other requirements
- Protect MMAC personnel from non-ionizing radiation hazards

C. Document Control Code: AMP400-OC-9.2-1

D. Date: 5/27/09

Revision Date: 6/15/09

1. Source of Hazard (activities):

- Elevated work near active radar systems that emit RF radiation

2. Legal and Other Requirements (specific to activities):

- 29 CFR 1910.97, Non-Ionizing Radiation
- 29 CFR 1926.54, Non-Ionizing Radiation
- FAA Order 3900.19B Chapter 14, Radiation Safety Program
- AC Order 3900.21F Chapter 14, Radiation Protection Program
- IEEE C95.1, IEEE Standard for Safety Levels with Respect to Human Exposure to Radio Frequency Electromagnetic Fields, 30 kHz to 300 GHz
- OSHA Voluntary Protection Program Policies and Procedures Manual, Directive #CSP03-01-003
- Parsons MMAC Site-Specific Safety Plan (applicable to Parsons personnel)
- Construction contracts that may affect this hazard

3. Operational Controls (such as engineering, administrative where applicable):

- Submit copy of construction documents for AMP-100 to review.
- Contact AMP-100A for current radiation monitoring data when elevated construction work is conducted near active radar systems that emit RF radiation.
- Advise construction contractor to conduct construction work in accordance with safe work procedures for any identified RF exposures.
- Conduct inspections of construction worksites and send advisory notices if safety hazards are observed.

4. Maintenance plan(s) for the operational controls:

- Review operational control at least annually and revise as necessary

5. Actions to be taken if controls fail:

- Conduct after-action meeting to discuss necessary corrective actions and to determine the root cause of failure.

6. Record(s):

- Record of review transmittal letter.
- Contractor advisory notices.

7. Responsibility:

Controls (from Section 3 above)	Responsible Individual
Submit copy of construction documents for AMP-100 to review.	Project Manager
Contact AMP-100A for current radiation monitoring data when elevated construction work is conducted near active radar systems that emit RF radiation.	Project Manager or Construction Inspector
Advise contractor to conduct construction work in accordance with safe work procedures for any identified RF exposures.	Project Manager or Construction Inspector
Conduct inspections of construction worksites and send advisory notices if safety hazards are observed.	Construction Inspectors

Operational Control Document

A. Significant OSH Hazard: Respiratory	B. Objective(s): <ul style="list-style-type: none"> Comply with applicable regulations and other requirements Protect MMAC personnel from respiratory hazards
C. Document Control Code: AMP400-OC-10.1-1	D. Date: 5/27/09 Revision Date:
1. Source of Hazard (activities): <ul style="list-style-type: none"> Construction contractor personnel may enter and attend confined spaces, which include: old boilers, tanks, vaults, and underground work (including basements and sewers). Excavation activities 	
2. Legal and Other Requirements (specific to activities): <ul style="list-style-type: none"> 29 CFR 1910.134, Permit-Required Confined Spaces and 1910.134, Respiratory Protection FAA 3900.19B Chapter 11, Confined Space Entry and Chapter 20, Respiratory Protection Program AC 3900.21F Chapter 11, Confined Space Entry and Chapter 20, Respiratory Protection ANSI Z88.2, Practices for Respiratory Protection ANSI Z88.6, Respiratory Protection Respirator Use ANSI/ASSE Z117.1, Safety Requirements for Confined Spaces OSHA Voluntary Protection Program Policies and Procedures Manual, Directive #CSP03-01-003 AMP-100A EOSH Services Contract Parsons MMAC Site-Specific Safety Plan (applicable to Parsons personnel) Construction contracts that may affect this hazard 	
3. Operational Controls (such as engineering, administrative where applicable): <ul style="list-style-type: none"> Contractors performing construction, renovation, repair, and related activities related to excavation and confined spaces are conducted in accordance with AC Order 3900.21F, Chapter 33, Construction (obtain confined space entry permits and excavation permits, as applicable) Use respiratory protection as required. Conduct inspections of construction worksites and send advisory notices if safety hazards are observed. 	
4. Maintenance plan(s) for the operational controls: <ul style="list-style-type: none"> Review operational control at least annually and revise as necessary 	
5. Actions to be taken if controls fail: <ul style="list-style-type: none"> Conduct after-action meeting to discuss necessary corrective actions, determine the root cause of failure, and modify documentation and any associated training. Contact AMP-100A for accident investigation. 	
6. Record(s): <ul style="list-style-type: none"> Records of confined space entry and excavation permits Contractor advisory notices. 	
7. Responsibility:	
Controls (from Section 3 above)	Responsible Individual
Contractors performing construction, renovation, repair, and related activities related to excavation and confined spaces are conducted in accordance with AC Order 3900.21F, Chapter 33, Construction	Responsible organization employees (applicable construction contractors)
Use respiratory protection as required	Responsible organization employees (applicable construction contractors)
Conduct inspections of construction worksites and send advisory notices if safety hazards are observed.	Construction Inspectors

DEPARTMENT OF TRANSPORTATION
CONTRACTOR'S RELEASE

CONTRACT NO.

CONTRACTOR (Name and Address)

SUM OF

DOLLARS

In consideration of the sum stated above, which has been paid or is to be paid to the Contractor, or his assignee, the Contractor, upon payment of the said sum by the UNITED STATES OF AMERICA (hereinafter called the Government), does remise, release, and discharge the Government, its officers, agents, and employees, of and from all liabilities, obligations, claims, and demands whatsoever under or arising from the said contract, except:

1. Specified claims in stated amounts or in estimated amounts where the amounts are not susceptible of exact statement by the Contractor, as follows:
2. Claims, together with reasonable expenses incidental thereto, based upon the liabilities of the Contractor to third parties arising out of the performance of this contract, which are not known to the Contractor on the date of the execution of this release and of which the Contractor gives notice in writing to the Contracting Officer within the period specified in the said contract, and
3. Claims for reimbursement of costs (other than expenses of the Contractor by reason of his indemnification of the Government against patent liability), including reasonable expenses incidental thereto, incurred by the Contractor under any provisions of the said contract relating to patents.

The Contractor agrees, in connection with patent matters and with claims which are not released as set forth above, that he will comply with all provisions of the said contract, including without limitations those provisions relating to notification to the Contracting Officer and relating to the defense or prosecution of litigation.

IN WITNESS WHEREOF, this release has been executed this ____ day of ____, 20__.

WITNESS

(Contractor)

BY

TITLE

NOTE: In the case of a corporation, witnesses are not required but the certification below must be completed.

CERTIFICATE

I, _____, certify that I am the
_____ secretary of the corporation named as Contractor in the foregoing release;
that _____ who signed said release on behalf of the Contractor was then
_____ of said corporation; that said release was duly signed for
and in behalf of said corporation by authority of its governing body and is within the scope of its corporate powers.

(CORPORATE SEAL)

BUSINESS DECLARATION

- 1 Name of Firm: _____ Tax Identification No.: _____
- 2 Address of Firm: _____ DUNS No.: _____
- 3 a. Telephone Number of Firm: _____ b. Fax Number of Firm: _____
- 4 a. Name of Person Making Declaration _____
- b. Telephone Number of Person Making Declaration _____
- c. Position Held in the Company _____
- 5 Controlling Interest in Company (*"X" all appropriate boxes*)
- ☐ a. Black American ☐ b. Hispanic American ☐ c. Native American ☐ d. Asian American
- ☐ e. Other Minority (*Specify*) _____ ☐ f. Other (*Specify*) _____
- ☐ g. Female ☐ h. Male ☐ i. 8(a) Certified (*Certification letter attached*) ☐ j. Service Disabled Veteran Small Business
- 6 Is the person identified in Number 4 above, responsible for day-to-day management and policy decision making, including but not limited to financial and management decisions?
- ☐ a. Yes ☐ b. No (*If "NO," provide the name and telephone number of the person who has this authority.*) _____
- 7 Nature of Business (*Specify all services/products (NAIC)*) _____
- 8 (a) Years the firm has been in business _____ (b) No. of Employees _____
- 9 Type of Ownership: ☐ a. Sole Ownership ☐ b. Partnership
- ☐ c. Other (*Explain*) _____
- 10 Gross receipts of the firm for the last three years:
- | | | | |
|-------------------------|---------------------------|-------------------------|---------------------------|
| a.2. Year Ending: _____ | b.2. Gross Receipts _____ | a.1. Year Ending: _____ | b.1. Gross Receipts _____ |
| a.3. Year Ending: _____ | b.3. Gross Receipts _____ | a.3. Year Ending: _____ | b.3. Gross Receipts _____ |
- 11 Is the firm a small business? ☐ a. Yes ☐ b. No
- 12 Is the firm a service disabled veteran owned small business? ☐ a. Yes ☐ b. No
- 13 Is the firm a socially and economically disadvantaged small business? ☐ a. Yes ☐ b. No

***I DECLARE THAT THE FOREGOING STATEMENTS CONCERNING _____
ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF. I AM
AWARE THAT I AM SUBJECT TO CRIMINAL PROSECUTION UNDER THE PROVISIONS OF 18 USCS 1001.***

14. a. _____ b. Date: _____

Signature _____

c. Typed _____ d. Title: _____

Name _____